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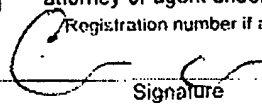
JUN 2 8 2005

| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | Docket Number (Optional) 146712007100 | |
|---|---|---|
| Application Number | 09/896,006 | Filed | June 28, 2001 |

For   RESONANT SHIFTING AND REDUCTION OF MODAL DISPLACEMENT FOR IMPROVED ACOUSTICS

| Art Unit | 2834 | Examiner | Y. Comas |
|---|---|---|---|

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

| | | Fee | Small Entity Fee | |
|---|---|---|---|---|
| x | One month (37 CFR 1.17(a)(1)) | $120 | $60 | $ 120.00 |
| | Two months (37 CFR 1.17(a)(2)) | $450 | $225 | $ |
| | Three months (37 CFR 1.17(a)(3)) | $1020 | $510 | $ |
| | Four months (37 CFR 1.17(a)(4)) | $1590 | $795 | $ |
| | Five months (37 CFR 1.17(a)(5)) | $2160 | $1080 | $ |

☐ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number   03-1952   I have enclosed a duplicate copy of this sheet. Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.

I am the
☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☐ attorney or agent of record. Registration Number _____

☒ attorney or agent under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34   48,375

Signature _____

Christopher B. Eide
Typed or printed name

June 28, 2005
Date

(650) 813-5720
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

☒ Total of   1   forms are submitted.

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PAGE 5/5 * RCVD AT 6/28/2005 7:04:21 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/0 * DNIS:8729306 * CSID: * DURATION (mm-ss):02-18